

APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SYSTEMS AND METHODS FOR CREATING AND UPDATING AN INTERACTIVE 3D VISUALIZATION OF MEDIA INDICES described and claimed in the specification:

Check one

*a. ☒ attached hereto.

b. ☐ filed on _____ as Application No. _____ and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024;
Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411;
Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771;
Mario A. Costantino, Reg. No. 33,565; Stephen J. Roe, Reg. No. 34,463;
Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025;
Richard E. Rice, Reg. No. 31,560; Paul Tsou, Reg. No. 37,956; and
Eric D. Morehouse, Reg. No. 38,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1 **Typewritten Full Name
of First or Sole Inventor**

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Patrick	Chiu
	Given Name	Middle Initial
	Family Name	
	1-8-04	
	Month	Day
	Year	
Residence:	Menlo Park	CA
	City	State or Province
Citizenship:	USA	Country
	Post Office Address:	
	(Insert complete mailing address, including country)	
	564 University Dr., Apt. 3	
	Menlo Park, CA 94025, USA	

*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

1 **Typewritten Full Name**
of Second Joint Inventor (if any)

Tohru	Fuse	
Given Name	Middle Initial	Family Name

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Month	Day	Year
Residence:	Fujisawa City	Kanagawa	Japan
	City	State or Province	Country

Citizenship: Japan

Post Office Address:
(Insert complete

401 Fujisawa Garden House
8-5 Minami-Fujisawa

mailing address,
including country)

Fujisawa City, Kanagawa 251-0055, Japan

1 **Typewritten Full Name**
of Third Joint Inventor (if any)

Kyuman	Song	
Given Name	Middle Initial	Family Name

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Month	Day	Year
Residence:	Cambridge	MA	U.S.A.
	City	State or Province	Country

Citizenship: South Korea

Post Office Address:
(Insert complete
mailing address,
including country)

36 Walker St. #2

Cambridge, MA 02138

1 **Typewritten Full Name**
of Fourth Joint Inventor (if any)

Laurent	Denoue	
Given Name	Middle Initial	Family Name

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Month	Day	Year
Residence:	Palo Alto	CA	USA
	City	State or Province	Country

Citizenship: France

Post Office Address:
(Insert complete
mailing address,
including country)

885 Fielding Drive

Palo Alto, CA 94303, USA

1 **Typewritten Full Name**
of Fifth Joint Inventor (if any)

Surapong	Lertsithichai	
Given Name	Middle Initial	Family Name

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Month	Day	Year
Residence:	Mountain View	CA	USA
	City	State or Province	Country

Citizenship: Thailand

Post Office Address:
(Insert complete
mailing address,
including country)

2101 California #109

Mountain View, CA 94040, USA

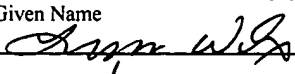
Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

IF THERE IS MORE THAN FIVE INVENTORS USE PAGE 3 AND PLACE AN "X" HERE ☒

PAGE 3 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

1 ***Typewritten Full Name***
of Second Joint Inventor (if any)

	Lynn	Wilcox
2 **Inventor's Signature:	Given Name	Middle Initial Family Name
3 **Date of Signature:		

	Month	Day	Year
Residence:	Palo Alto	CA	USA

	City	State or Province	Country
--	------	-------------------	---------

Citizenship: USA

Post Office Address:
(Insert complete mailing address, including country)

555 Stanford Avenue

Palo Alto, CA 94306, USA

1 ***Typewritten Full Name***
of Third Joint Inventor (if any)

	Given Name	Middle Initial	Family Name
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2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Month	Day	Year
--	-------	-----	------

Residence:

	City	State or Province	Country
--	------	-------------------	---------

Citizenship:

Post Office Address:
(Insert complete mailing address, including country)

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--	------------	----------------	-------------

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	Month	Day	Year
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3 ****Date of Signature:**

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Residence:

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--	------	-------------------	---------

Citizenship:

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FROM :

FAX NO. :

May. 22 2003 01:10PM P1

Docket No.: 114890

APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name; that
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Edward P. Walker, Reg. No. 31,459; Robert A. Miller, Reg. No. 32,771;
Mario A. Costantino, Reg. No. 33,565; Stephen J. Rot, Reg. No. 34,463;
Joel S. Armstrong, Reg. No. 36,430; Christopher W. Brown, Reg. No. 38,025;
Richard E. Rizer, Reg. No. 31,560; Paul Tsou, Reg. No. 37,956; and
Eric D. Morehouse, Reg. No. 38,565.

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1 *Typewritten Full Name
of First or Sole Inventor*

Patrick	Chiu
Given Name	Family Name
<i>Patrick</i>	<i>Chiu</i>

2 ****Inventor's Signature:**

3 ****Date of Signature:**

Month	Day	Year
<i>1</i>	<i>8</i>	<i>04</i>

Residence:

Menlo Park	CA	USA
City	State or Province	Country
USA		

Citizenship:

Post Office Address: (Insert complete mailing address, including country)
564 University Dr., Apt. 3 Menlo Park, CA 94025, USA

*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

FROM :

FAX NO. :

May. 22 2003 01:11PM P2

PAGE 2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

1 <i>Typewritten Full Name of Second Joint Inventor (if any)</i>			
	<u>Tohru</u>	<u></u>	<u>Fuse</u>
	Given Name	Middle Initial	Family Name
2 <i>**Inventor's Signature:</i>	<u><i>[Signature]</i></u>		
3 <i>**Date of Signature:</i>	<u>1</u>	<u>8</u>	<u>2004</u>
	Month	Day	Year
Residence:	<u>Fujisawa City</u>	<u>Kanagawa</u>	<u>Japan</u>
	City	State or Province	Country
Citizenship:	<u>Japan</u>		
	Post Office Address: (Insert complete mailing address, including country)		
	<u>401 Fujisawa Garden House</u>		
	<u>8-5 Minami-Fujisawa</u>		
	<u>Fujisawa City, Kanagawa 251-0055, Japan</u>		

1 <i>Typewritten Full Name of Third Joint Inventor (if any)</i>			
	<u>Kyuman</u>	<u></u>	<u>Song</u>
	Given Name	Middle Initial	Family Name
2 <i>**Inventor's Signature:</i>	<u><i>[Signature]</i></u>		
3 <i>**Date of Signature:</i>	<u>1</u>	<u>8</u>	<u>2004</u>
	Month	Day	Year
Residence:	<u>Cambridge</u>	<u>MA</u>	<u>U.S.A.</u>
	City	State or Province	Country
Citizenship:	<u>South Korea</u>		
	Post Office Address: (Insert complete mailing address, including country)		
	<u>36 Walker St. #2</u>		
	<u>Cambridge, MA 02138</u>		

1 <i>Typewritten Full Name of Fourth Joint Inventor (if any)</i>			
	<u>Laurent</u>	<u></u>	<u>Denoue</u>
	Given Name	Middle Initial	Family Name
2 <i>**Inventor's Signature:</i>	<u></u>		
3 <i>**Date of Signature:</i>	<u></u>	<u></u>	<u></u>
	Month	Day	Year
Residence:	<u>Palo Alto</u>	<u>CA</u>	<u>USA</u>
	City	State or Province	Country
Citizenship:	<u>France</u>		
	Post Office Address: (Insert complete mailing address, including country)		
	<u>885 Fielding Drive</u>		
	<u>Palo Alto, CA 94303, USA</u>		

1 <i>Typewritten Full Name of Fifth Joint Inventor (if any)</i>			
	<u>Sirapong</u>	<u></u>	<u>Lertsithichai</u>
	Given Name	Middle Initial	Family Name
2 <i>**Inventor's Signature:</i>	<u></u>		
3 <i>**Date of Signature:</i>	<u></u>	<u></u>	<u></u>
	Month	Day	Year
Residence:	<u>Mountain View</u>	<u>CA</u>	<u>USA</u>
	City	State or Province	Country
Citizenship:	<u>Thailand</u>		
	Post Office Address: (Insert complete mailing address, including country)		
	<u>2101 California #109</u>		
	<u>Mountain View, CA 94040, USA</u>		

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PAGE 3 OF U.S.A. DECLARATION FORM
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1 *Typewritten Full Name
of Second Joint Inventor (if any)*

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Lynn	Middle Initial	Wilcox
	Given Name	Middle Initial	Family Name
	<i>Lynn Wilcox</i>		
	Month	Day	Year
	8	8	04
Residence:	Palo Alto	CA	USA
	City	State or Province	Country
Citizenship:	USA		
	Post Office Address: (Insert complete mailing address, including country)	555 Stanford Avenue	
		Palo Alto, CA 94306, USA	

1 *Typewritten Full Name
of Third Joint Inventor (if any)*

2 ****Inventor's Signature:**

3 ****Date of Signature:**

	Given Name	Middle Initial	Family Name
	Month	Day	Year
Residence:	City	State or Province	Country
Citizenship:			
	Post Office Address: (Insert complete mailing address, including country)		

1 *Typewritten Full Name
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3 ****Date of Signature:**

	Given Name	Middle Initial	Family Name
	Month	Day	Year
Residence:	City	State or Province	Country
Citizenship:			
	Post Office Address: (Insert complete mailing address, including country)		

1 *Typewritten Full Name
of Fifth Joint Inventor (if any)*

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Citizenship:			
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